SAUK COUNTY HEALTH CARE CENTER -FDD

S4555 HIGHWAY CH

REEDSBURG	53959	Phone: (608) 524-4371		Ownership:	County
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	FDDs
Operate in Con	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/03):	23	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/03):	23	Title 19 (Medicaid) Certified?	Yes
Number of Resi	dents on 12/31	./03:	21	Average Daily Census:	20

Services Provided to Non-Residents		Age, Gender, and Primary Di	_			Length of Stay (12/31/03)	8	
Home Health Care	No	Primary Diagnosis	90	Age Groups	9	Less Than 1 Year	9.5 9.5	
Supp. Home Care-Personal Care Supp. Home Care-Household Services	No No	Developmental Disabilities		'			76.2	
Day Services	No	·		65 - 74	23.8			
Respite Care	No	Mental Illness (Other)			14.3	•	95.2	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	4.8	********	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals No						Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	0.0	65 & Over	42.9			
Transportation	No	Cerebrovascular	0.0			RNs	1.9	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs	11.8	
Other Services	No	Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	57.1	Aides, & Orderlies	5.7	
Mentally Ill	No			Female	42.9			
Provide Day Programming for			100.0					
Developmentally Disabled	Yes				100.0			
***********	***	*******	*****	******	******	********	*****	

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		P	rivate Pay			amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	00	Per Diem (\$)	No.	96	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				21	100.0	175	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	21	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		21	100.0		0	0.0		0	0.0		0	0.0		0	0.0		21	100.0

County: Sauk
SAUK COUNTY HEALTH CARE CENTER -FDD

*******	*****	******	*****	****	*****	* * * * * * * * * * * * * * * * * * * *	*****				
Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services	, and Activities as of 12	/31/03				
Deaths During Reporting Period											
					% Needing		Total				
Percent Admissions from:		Activities of	용	As	sistance of	% Totally	Number of				
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents				
Private Home/With Home Health	30.0	Bathing	0.0		71.4	28.6	21				
Other Nursing Homes	0.0	Dressing	4.8		66.7	28.6	21				
Acute Care Hospitals	40.0	Transferring	28.6		47.6	23.8	21				
Psych. HospMR/DD Facilities	0.0	Toilet Use	9.5		61.9	28.6	21				
Rehabilitation Hospitals	0.0	Eating	52.4		14.3	33.3	21				
Other Locations	30.0	******	*****	*****	*****	* * * * * * * * * * * * * * * * * * * *	******				
Total Number of Admissions	10	Continence		용	Special Trea	tments	용				
Percent Discharges To:		Indwelling Or Extern	al Catheter	4.8	Receiving	Respiratory Care	9.5				
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	71.4	Receiving	Tracheostomy Care	0.0				
Private Home/With Home Health	37.5	Occ/Freq. Incontinen	t of Bowel	0.0	Receiving	Suctioning	0.0				
Other Nursing Homes	0.0				Receiving	Ostomy Care	0.0				
Acute Care Hospitals	25.0	Mobility			Receiving	Tube Feeding	0.0				
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	42.9	Receiving	Mechanically Altered Diet	s 76.2				
Rehabilitation Hospitals	0.0										
Other Locations	25.0	Skin Care			Other Reside	nt Characteristics					
Deaths	12.5	With Pressure Sores		0.0	Have Advan	ce Directives	4.8				
Total Number of Discharges		With Rashes		4.8	Medications						
(Including Deaths)	8				Receiving	Psychoactive Drugs	33.3				

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility		FDD cilities		All ilties
	8	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.0	89.6	0.97	87 . 4	0.99
Current Residents from In-County	52.4	33.5	1.56	76.7	0.68
Admissions from In-County, Still Residing	10.0	11.3	0.89	19.6	0.51
Admissions/Average Daily Census	50.0	21.3	2.35	141.3	0.35
Discharges/Average Daily Census	40.0	25.0	1.60	142.5	0.28
Discharges To Private Residence/Average Daily Census	15.0	11.4	1.32	61.6	0.24
Residents Receiving Skilled Care	0.0	0.0	0.00	88.1	0.00
Residents Aged 65 and Older	42.9	15.3	2.80	87.8	0.49
Title 19 (Medicaid) Funded Residents	100.0	99.3	1.01	65.9	1.52
Private Pay Funded Residents	0.0	0.5	0.00	21.0	0.00
Developmentally Disabled Residents	100.0	99.4	1.01	6.5	15.40
Mentally Ill Residents	0.0	0.3	0.00	33.6	0.00
General Medical Service Residents	0.0	0.3	0.00	20.6	0.00
Impaired ADL (Mean) *	56.2	53.1	1.06	49.4	1.14
Psychological Problems	33.3	50.1	0.67	57.4	0.58
Nursing Care Required (Mean) *	11.3	11.0	1.02	7.3	1.54